

THE MOST SERIOUS STRESSORS IN FOREIGN MILITARY MISSIONS

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ABSTRACT

The paper reports on completely new approach to surveys among military missions veterans. Unlike other surveys conducted so far the participants in this research took part completely on a voluntary basis. The data were collected through semi-structured interviews. These qualitative data were consequently used for creating a quantitative questionnaire.

1.0 INTRODUCTION

There is no doubt that military missions represent a serious life stressor. However, there is a lack of research studies that show any significant evidence. The questionnaire surveys conducted so far (within the Army of the Czech Republic) have not been generally accepted by the military. Due to this fact the results gained through such surveys have not brought convincing findings. (It means that even though our clinical work proved significant impact of the missions on mental health, all the attempts to verify and validate these clinical findings were unsuccessful). Thus we decided to conduct a qualitative research based on long and comprehensive semi-structured interviews. The participation in the research was strictly on a voluntary basis. The interviews covered the following topics:

Personal history

Predeployment

Deployment

Milestones in the mission

Traumatic incidents

Postdeployment

Evaluation of the mission

We managed to design a completely new questionnaire based on the results of this qualitative survey. Due to this approach the questionnaire items are based on authentic opinions, experience and expressions of the troops. Consequently, the questionnaire itself is much better accepted by the military comparing to all the previous ones.

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2.0 METHOD:

As mentioned above, the questionnaires represent the most used data collecting method. However, we know by experience that the level of cooperation in such surveys is really low. In fact the troops usually cooperate formally but the acquired data is often useless. In general the willingness and openness towards the questionnaires are really low. There are more possible reasons for such situation – the number of surveys simultaneously conducted, no motivation to answer (troops often say that they do not believe the findings will make things better) and the fact that the questionnaires are usually mandatory.

These reasons led us to bring up a new type of the survey. First of all we were convinced about the need to keep everything voluntary and we also tried to enhance the motivation. Thus we offered rewards for the participants – we were able to pay them (as appreciation of their cooperation and compensation for the time they spent working on our survey). The amount of money was not big - it was equivalent to approximately 20 USD but it really made the survey attractive.

The second important factor was the method itself – we did not use the questionnaire but we chose the semi-structured interview. These interviews were comprehensive and covered:

personal history (as detailed as would be for the clinical assessment),

personal military history (length of the service, reasons which led the person to join the armed forces, missions conducted, rank, military education etc),

pre-deployment phase (how long the soldier knew he/she would be deployed, motivation, reactions of the close people, training prior to the deployment, self-evaluation of the preparedness etc,

deployment (job performed in the mission, duration and problems of the adaptation phase, characteristics of the mission, duration of the deployment, possibilities of contact with the close people, interpersonal relations in the mission, perception of the commanders, etc.

“Milestones” in the mission (i.e. any events which were perceived as important or significant)

traumatic incidents (artillery, mortar or rocket attacks, direct combat experience, injuries, death, accidents, exposition to civilians’ starving, children as war victims, etc)

post-deployment (process of reunion, any changes in social status, changes in relationships, changes in hobbies, any psychopathology developed after the deployment, any difficulties in adapting back to the “normal” life)

evaluation of the mission (if the mission was easy or demanding, satisfaction, willingness to be deployed again and when, opinion concerning the ideal length of the mission and time required for full recovery)

During the interview we did not offer any multiple choice type answers. We tried not to expect anything. We were interested in soldiers’ authentic vocabulary and language, in their perception of what is important and what is not.

Our sample of interviewees is not a representative one. The survey was generally open to all the veterans no matter how long ago they were deployed or whether they still were in the army. Altogether we have interviewed 103 respondents (89 men and 14 women). The interviews were conducted by clinical psychologists or psychiatrists from the Central Military Hospital in Prague and the average length of interviews was about 120 minutes. In general we can say that those who were not in active duty during the

interview were much more communicative, while the active military professionals were more careful about what they say (in spite of the fact the survey was anonymous).

The answers to every single question were simply sorted according to frequency. They were grouped together either according to similar wording or similar meaning. Consequently, we merely counted the answers in each group.

3.0 STRESSORS

Part of questions concerned the stressors. Basically we just asked what the troops considered to be stressful and demanding. Consequently, we sorted the answers according to the frequency and the list we acquired looks as follows:

poor achievement of commanders (inability to make decisions, giving the promises without any intention to fulfil them, lack of competency, commanders were not skilled enough to perform as respected leaders) (22%)

rocket and mortar attacks (the source of stress as well as the cause of injuries, everyday fear, tiredness of repeated alerts, prolonged feeling of uncertainty) (14%)

helplessness when facing the starving of local people, inability to help them, confrontation with poverty in the countries of deployment (13%)

shooting and fire, huge amount of weapons among the civilians (10%)

poor interpersonal relations (both with the superiors and the colleagues) (9%)

need to cooperate with people who had psychological problems (9%)

lack of privacy (8%)

limited space (5%)

lack of information (3%)

separation from the family (3%)

mine and IED danger (3%)

fatigue (3%)

poor telephone or internet connection with family (3%)

4.0 THE MOST DEMANDING FACTORS

We intentionally used two questions which might sound similarly – the most important stressors and the most demanding factors. Even though they look similar, our respondents tended to answer differently. After sorting the answers according to frequency we acquire the following list:

separation from the families or close people (14%)

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worries about the families or close people (in general we can say that the worse families coped with the fact that one member is deployed, the more intrusive worries these deployed members had) (13%)

job factors (much more work than people used to have at home, lack of leisure time, monotonous work) (13%)

poor level of leadership (10%)

climatic factors (9%)

presence of death (7%)

need to wear the body armour (3%)

boredom (3%)

poor interpersonal relations (3%)

5.0 INSECURITY

When we asked about insecurity the most frequent answer was that nothing was sure in the mission, that one could not really plan anything. Our respondents described the feelings of alertness, tension and worries that were somehow present during the entire mission. We also received the answers mentioning the fear of own failure or fear of bad luck (accidents, repatriation). The insecurities often concerned the general security situation, the fact that an attack can occur anytime. Another source of insecurities concerned the mission itself, for example the troops were told about the deployment briefly before the departure. Or they were not deployed with their own unit, which often caused the social problems during the mission. Sometimes the job performed in the mission was different from the one at home. Another significant source of insecurity was the fact that the Army of the Czech Republic is in the process of constant change and sometimes people were transferred to another unit when they were already deployed so they did not know what to expect after the mission. In these cases they were really disappointed and felt that the army did not really care about its troops.

Soldiers often complained about the lack of information what was going on at home and also in the country of their deployment – they felt they did not know anything about the life in the country they were deployed in. Sometimes they were convinced that this was on purpose. Furthermore they felt insecurity concerning the length of the mission. They complained about the fact they did not know when they would return home and whether they would have a leave during the mission.

In general the troops complain about the situations they perceive to be worsened by the commanders' indecisiveness or bad decisions. Before the deployment the troops complain about the lack of information about the upcoming mission. These worries are even worsened by the families' insecurity.

During the deployment we see the insecurities which can be divided to the following categories:

insecurities about the possibility of making plans (20%)

security (13%)

information (13%)

situation at home (4%)

mistrust of commanders (3%)

6.0 FEAR IN THE MISSION:

Approximately one third of the respondents denied they felt any fear during the deployment. Most of those who admitted the fear described specific situations in which they were afraid. Usually they described direct or indirect fire, IEDs. Some described the fear of captivity or kidnap. They were very often afraid when they had anything in common with the local armed forces. Both in the cases when they were in the position of instructors or trainers and in situation when they had to cooperate with the local army on patrolling, search operations, etc.

Significant amount of respondents stated they were surprised they did not feel any fear in the situation they would expect some. A lot of them used expressions like “respect”, “awareness of danger”, etc. Some troops agree on the fact that the sensation of fear often comes afterwards. Another common phenomenon is some kind of “alexithymia” when the troops describe the fact they did not feel the sensation of fear but after some time they realized they could not sleep, they were exhausted or they felt serious dropdown of their fitness. Some also describe intrusive “afterwards” thoughts about what they should have or should not have done.

Some respondents relied on the fate, they coped with the fear with belief that everything had already been decided and they were predestinated to “succeed or fail”.

Most of the people agree that the fear tends to be worse in the adaptation phase and it gradually decreases. (This also applies when they compared (when comparable) the missions – the first mission tends to be worse than the consequent ones.) The second “peak of fear” occurs before the end of deployment – with the perspective of going home troops tend to be more afraid and try to spend the rest of the mission as safe as possible.

Approximately half of the respondents consider the fear as something positive which activates them and causes better achievement while the other half perceives it as exhausting.

There are also differences in fear descriptions between those who are in the commanding position and those who are not. For the subordinates the word fear is usually associated with the worries about themselves while the leaders would more often connect it with their subordinates, with the sense of responsibility. If we try to categorize the fear we would come to the following:

dangerous situations (43%)

not feeling any fear (19%)

fear only in the initial phase of the mission (14%)

general fear (7%)

permanent fear (5%)

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positive (activating) fear (5%)

worries about the others (5%)

worries about families at home (3%)

fear only outside the base boundaries (3%)

7.0 SEEK FOR HELP IN THE MISSION

We also tried to answer the question whether the troops tend to seek help in stressful situations. In fact this part was the least informative of the survey since approximately two thirds of respondents denied any need of help in general.

Among those who admitted they needed some help the majority agree that the most common form was informal help among the colleagues. It actually means humor, peer to peer support, spontaneous debriefings but also risky behavior. Some respondents admitted they used alcohol, smoked or did excessive exercises. Only about five percent seek help of psychologist or psychiatrist.

The majority of respondents denied seeking any help – both official and informal. Only 33% admitted they needed some kind of help. If we categorize these answers we obtain the following list:

- Informal help – the peer to peer support (13%)
- Informal “debriefings” (13%)
- Official help – psychologist, psychiatrist, chaplain (5%)
- No help needed at all (2%)

Trauma and traumatic situations

The questions concerning traumatic situations were following:

“Did you experience (when deployed) any situation which you had never experienced before and which you will probably never forget?”

“Did you witness any horrifying situation (death, injury, traffic accident, plane crash, etc)?”

“Were you in the situation in which your life was endangered or did you have to do anything you strongly disagreed with?”

We received a wide range of responses which covered hundreds of descriptions of dangerous situations. We tried to categorize them:

Combat, attacks (96%)

Environment (39%)

Accidents (31%)

Death (27%)

Workload (14%)

Injuries (12%)

War crimes (11%)

Local people's reactions (7%)

8.0 MISSION EVALUATION

We also asked the respondents for some general opinions concerning the missions:

Their profits...

Their losses...

Would he or she do it again?

For how long?

Optimal length?

Optimal frequency?

This category has not been completely processed yet. Unlike answers to other questions (which can be generalized) these responses are closely dependent on the year of deployment, type of mission, and to the fact whether the respondent is still in active duty.

9.0 SUMMARY

To sum up, we can say that the number of soldiers who feel „damaged“ after the mission is declining with experience gained in preparation for missions. A very important factor is the support from home – those who leave to the mission despite the disagreement of their families often suffer. And the experience is here important as well since those who previously experienced separation from family did not suffer so much.

The results of this survey are very useful. Thanks to the voluntary basis we worked only with people willing to share their experience and thus have received valuable information.

We used the data gained during this qualitative phase to develop a questionnaire which uses the troops' language and dictionary, which respects their view of the problems. Nowadays we continue with the second phase – the quantitative one. But even during this phase we still respect the original premise of the voluntary basis.

